

Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, UT 84114
Phone: (801) 538-3800
Tammy Greening, Examiner
Phone: (801) 538-3786

**BEFORE THE INSURANCE COMMISSIONER
STATE OF UTAH**

**UTAH INSURANCE DEPARTMENT
COMPLAINANT**

VS.

RESPONDENT

Standard Security Life Insurance Company
of New York
Attn: David Getz
485 Madison Avenue, 14th Floor
New York, New York 10022

UT ID No. 1185

**NOTICE OF INFORMAL
AGENCY ACTION
AND ORDER**

Docket No. 2015-043 HL
Enf. Case No. 3605
Judge Mark Kleinfeld
Administrative Law Judge

The Utah Insurance Department has commenced this informal adjudicative proceeding pursuant to Utah Code Ann. § 31A-2-201 and 63G-4-201 and Utah Admin. Code R590-160.

Based upon information contained in agency files or known to the Commissioner, the Commissioner makes the following:

FINDINGS OF FACT

1. Respondent is an insurer domiciled in the State of New York and authorized to do the business of insurance in the State of Utah, Utah Company Identification No. 1185.
2. Respondent failed to timely file the annual Actuarial Certification Report electronically via SERFF on or before April 1, 2014, as required by Utah Code Ann. § 31A-30-106, Utah Admin. Code R590-220-10 and Bulletin 2007-3.

Having entered his Findings of Fact, the Commissioner now enters his:

CONCLUSION OF LAW

1. In failing to timely file its annual Actuarial Certification Report, the Respondent violated Utah Code Annotated 31A-30-106 and Utah Administrative Code 590-220-10.
2. Pursuant to Utah Code Ann. § 31A-2-308, the commissioner may impose a forfeiture of up to \$5,000 for each violation of the Utah Insurance Code or Rules.

Based upon the foregoing Findings of Fact and Conclusions of Law, the Commissioner now enters the following:

ORDER

IT IS HEREBY ORDERED:

1. Respondent is assessed an administrative forfeiture in the amount of \$750.00. Said forfeiture shall be paid no later than ten (10) days after the date this Order becomes final.
2. This Order shall become final fifteen (15) days after the date of mailing unless a written request for a hearing is received from the Respondent in the offices of the department prior to that date. A written request for a hearing shall be signed by the person making the request and shall state the basis for the relief requested.

NOTIFICATION


If you request a hearing regarding this matter, please contact the Brent Oscarson, at 801-538-3195. Failure to request a hearing will be considered a failure to exhaust administrative remedies and will preclude any further administrative or judicial review or appeal of this matter.

You are further notified that a failure to obey an Order of the commissioner may subject you to further penalties, including forfeitures of up to \$2,500.00 per violation and the suspension or revocation of your license and the filing of an action to enforce this Order in District Court, which may impose forfeitures of up to \$10,000.00 per day for continued violation.

You are further notified that other jurisdictions in which you may be licensed may require that you report this action to them.

DATED THIS 3 day of April, 2015.

TODD E. KISER
INSURANCE COMMISSIONER

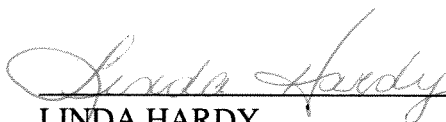

MARK KLEINFELD, J.D.
ADMINISTRATIVE LAW JUDGE
Utah Insurance Department
State Office Building, Room 3110
Salt Lake City, Utah 84114
Telephone (801) 538-3800

CERTIFICATE OF MAILING

The undersigned certifies on this date, a true and correct copy of the forgoing NOTICE OF AGENCY ACTION AND ORDER was mailed, postage prepaid, to the following:

Standard Security Life Insurance
Company of New York
Attn: David Getz
485 Madison Avenue, 14th Floor
New York, New York 10022

DATED this 3Rd April, 2015

A handwritten signature in cursive script, reading "Linda Hardy", is written over a horizontal line.

LINDA HARDY
UTAH INSURANCE DEPARTMENT
STATE OFFICE BUILDING, ROOM 3110
SALT LAKE CITY, UT 84114-6901



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

Insurance Department

UTAH Invoice - Original

DAVID GETZ
STANDARD SECURITY LIFE INSURANCE COMPANY OF
NEW YORK
485 MADISON AVENUE
14TH FLOOR
NEW YORK NY 10022

Printed Date: April 3, 2015
Invoice Date: April 3 2015
Balance Due: \$750.00
Due Date: May 8, 2015
Invoice ID: 759339
Payor ID: 1185

Date	Item Description	Amount	
04-02-2015	Monetary Penalty Company	\$750.00	E-Case 3605 Docket 2015-043 HL

No Adjustments

No Payments

Balance Amount Due \$750.00

UTAH Invoice - Original

Make check payable to: Utah Insurance Department
Send payment to:
Utah Insurance Department
3110 State Office Building
Salt Lake City, UT 84114-6901

Invoice Date: April 3, 2015
Balance Due: \$750.00
Due Date: May 8, 2015
Invoice ID: 759339
Payor ID: 1185

E-Case 3605 Docket 2015-043 HL

Detach and Return this Voucher with Payment
Payments Will Not Be Processed without Voucher